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PTO/SB/82 (10-00)

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REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	08/947,668
Filing Date	10/09/1997
First Named Inventor	Tracy C. Slemker
Group Art Unit	3738
Examiner Name	David H. Willse
Attorney Docket Number	

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

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OR

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Customer Number →  08698

OR

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Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	ROBERT E. ARBOGAST, PRES.
Signature	Robert E. Arbogast
Date	MARCH 7, 2003

Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*

*Total of 1 forms are submitted.

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Application Number	08/947,668
Filing Date	10/09/1997
First Named Inventor	Tracy C. Slemker
Title	VALVE ASSEMBLY FOR A PROSTHETIC LIMB
Group Art Unit	3738
Examiner Name	David H. Willse
Attorney Docket Number	OHI 1717-004

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SIGNATURE of Applicant or Assignee of Record

Name: ROBERT E. ARBOCAST, PRES.
Signature: Robert E. Arboast
Date: MARCH 7, 2003

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3738

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	08/947,668
		Filing Date	10/09/1997
		First Named Inventor	Tracy C. Slemker
		Group Art Unit	3738
		Examiner Name	David H. Willse
Total Number of Pages in This Submission	3	Attorney Docket Number	OHI 1717-004

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Revocation of Power of Attorney or Authorization of Agent and Power of Attorney or Authorization of Agent
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD Number of CD(s)	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

Remarks

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Eric M. Gayan
Signature	
Date	March 10, 2003

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner, for Patents, Washington, D.C. 20231 on this date:

Typed or printed name	Sheri L. Burke, Paralegal	
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Date	March 10, 2003	

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